

Private Employer / E-Verify Affidavit

By executing this affidavit under oath, the undersigned private employer verifies one of the following with respect to its application for a business license, occupational tax certificate, or other document required to operate a business as referenced in O.C.G.A. § 36-60-6(d):

Section 1. Please check only one:

(A) _____ On January 1st of the below-signed year, the individual, firm, or corporation employed **more than ten (10) employees**¹.

***** If you select Section 1(A), please fill out Section 2 and then execute below. *****

(B) _____ On January 1st of the below-signed year, the individual, firm, or corporation employed **ten (10) or fewer employees**.

***** If you select Section 1(B), please skip Section 2 and execute below. *****

Section 2.

The employer has registered with and utilizes the federal work authorization program in accordance with the applicable provisions and deadlines established in O.C.G.A. § 36-60-6. The undersigned private employer also attests that its federal work authorization user identification number and date of authorization are as follows:

E-Verify Number

(Federal Work Authorization User Identification Number)

Date of Authorization

**** _____ - Identification type and number if E-Verify is not applicable. ****

THIS FORM MUST BE NOTARIZED

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____ of _____, 201____ in _____, _____.
Day Month Year City State

Name of Employer

X

Signature of Authorized Officer or Agent

X

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE _____ DAY OF _____, _____

NOTARY PUBLIC

My Commission Expires: _____